

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 25, 2002 8:00 am
Secretary of State

03-25-2002 90029 004 ***150.00

DOCUMENT # P97000035766

1. Entity Name
JZ REALTY DEVELOPMENT CORP.

Principal Place of Business
3415 W. CYPRESS STREET
TAMPA FL 33607

Mailing Address
P.O. BOX 159
TARPON SPRINGS FL 34688

2. Principal Place of Business

3455 Countryside Blvd
 Suite, Apt. #, etc.
78

3. Mailing Address

Suite, Apt. #, etc.
SAME

City & State

Clearwater FL

Zip

33761

Country

FL

Zip

33761

Country

FL

Zip

33761

Country

FL

Zip

33761

Country

FL

Zip

33761

Country

FL

Zip

33761

Country

FL

Zip

33761

Country

FL

Zip

33761

Country

FL

Zip

33761

Country

FL

Zip

33761

Country

FL

Zip

33761

Country

FL

Zip

33761

Country

FL

Zip

33761



DO NOT WRITE IN THIS SPACE

4. FEI Number **59-3463343**

Applied For
 Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

ZAVODNY, R. JOHN
3415 W. CYPRESS STREET
TAMPA FL 33607

7. Name and Address of New Registered Agent

Name **R. John Zavodny**
 Street Address (P.O. Box Number is Not Acceptable) **3455 Countryside Blvd # 78**
 City **Clearwater** **FL** Zip Code **33761**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and title, if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so.
 (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
PSDT	ZAVODNY, R. JOHN	3415 W. CYPRESS STREET	TAMPA FL 33607	<input type="checkbox"/>
		3455 Countryside Blvd # 78	Clearwater FL 33761	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/01)